

TDWR

|   |                        |   |   |
|---|------------------------|---|---|
| <b>POTENTIAL HAZARDOUS WASTE SITE<br/>IDENTIFICATION AND PRELIMINARY ASSESSMENT</b>   |                        | REGION<br><b>6</b>  | SITE NUMBER (to be assigned by HQ)<br><b>TX 04499</b> |
| <b>NOTE:</b> This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.  |                        |   |   |
| <b>GENERAL INSTRUCTIONS:</b> Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.  |                        |   |   |
| <b>I. SITE IDENTIFICATION</b>   |                        |   |   |
| <b>A. SITE NAME</b><br>American Chromet Chemists Inc.   |                        | <b>B. STREET (or other identifier)</b><br>P.O. Box 9912   |   |
| <b>C. CITY</b><br>Corpus Christi  | <b>D. STATE</b><br>TX. | <b>E. ZIP CODE</b><br>78408   | <b>F. COUNTY NAME</b><br>Nueces                       |
| <b>G. OWNER/OPERATOR (If known)</b><br>1. NAME<br>Same as "A" above.  |                        | 2. TELEPHONE NUMBER<br>(512) 883-6421   |   |
| <b>H. TYPE OF OWNERSHIP</b><br><input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input checked="" type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN  |                        |   |   |
| <b>I. SITE DESCRIPTION</b><br>Storage tanks, Chromium treatment area, (Hexavalent Cr treatment)   |                        |   |   |
| <b>J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)</b><br>UNKNOWN  |                        |   | <b>K. DATE IDENTIFIED (mo., day, &amp; yr.)</b>       |
| <b>L. PRINCIPAL STATE CONTACT</b><br>1. NAME<br>Paul Kutchinski - T.D.W.R. (Corpus Christi, Texas)  |                        |   |   |
|   |                        |   | 2. TELEPHONE NUMBER<br>(512) 882-2548                 |
| <b>II. PRELIMINARY ASSESSMENT (complete this section last)</b>  |                        |   |   |
| <b>A. APPARENT SERIOUSNESS OF PROBLEM</b><br><input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input checked="" type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE <input type="checkbox"/> 5. UNKNOWN  |                        |   |   |
| <b>B. RECOMMENDATION</b><br><input checked="" type="checkbox"/> 1. NO ACTION NEEDED (no hazard)<br><input type="checkbox"/> 2. IMMEDIATE SITE INSPECTION NEEDED<br>a. TENTATIVELY SCHEDULED FOR:<br>b. WILL BE PERFORMED BY:<br><input type="checkbox"/> 3. SITE INSPECTION NEEDED<br>a. TENTATIVELY SCHEDULED FOR:<br>b. WILL BE PERFORMED BY:<br><input type="checkbox"/> 4. SITE INSPECTION NEEDED (low priority)  |                        |   |   |
| <b>C. PREPARER INFORMATION</b><br>1. NAME<br>Ken Cooper   |                        |   |   |
|   |                        | 2. TELEPHONE NUMBER<br>(713) 226-5761   | 3. DATE (mo., day, & yr.)<br>12-29-80                 |
| <b>III. SITE INFORMATION</b>  |                        |   |   |
| <b>A. SITE STATUS</b><br><input checked="" type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)<br><input type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.)<br><input type="checkbox"/> 3. OTHER (specify):<br>(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.) |                        |   |   |
| <b>SUPERFUND FILE</b>   |                        |   |   |
| <b>B. IS GENERATOR ON SITE?</b><br><input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify generator's four-digit SIC Code): 2816 / 2819   |                        |   |   |
| <b>C. AREA OF SITE (In acres)</b><br>Storage & 1-treatment  |                        | <b>D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES</b><br>1. LATITUDE (deg.-min.-sec.)<br>27° 48' 59" |   |
|   |                        | 2. LONGITUDE (deg.-min.-sec.)<br>97° 26' 07"  |   |
| <b>E. ARE THERE BUILDINGS ON THE SITE?</b><br><input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify): Production facilities, storage tanks, Cr treatment   |                        |   |   |

## IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

| X | A. TRANSPORTER      | X | B. STORER              | X | C. TREATER                | X | D. DISPOSER              |
|---|---------------------|---|------------------------|---|---------------------------|---|--------------------------|
|   | 1. RAIL             |   | 1. PILE                | X | 1. FILTRATION             |   | 1. LANDFILL              |
|   | 2. SHIP             |   | 2. SURFACE IMPOUNDMENT |   | 2. INCINERATION           |   | 2. LANDFARM              |
|   | 3. BARGE            |   | 3. DRUMS               |   | 3. VOLUME REDUCTION       |   | 3. OPEN DUMP             |
|   | 4. TRUCK            | X | 4. TANK, ABOVE GROUND  |   | 4. RECYCLING/RECOVERY     |   | 4. SURFACE IMPOUNDMENT   |
|   | 5. PIPELINE         |   | 5. TANK, BELOW GROUND  | X | 5. CHEM./PHYS. TREATMENT  |   | 5. MIDNIGHT DUMPING      |
|   | 6. OTHER (specify): |   | 6. OTHER (specify):    |   | 6. BIOLOGICAL TREATMENT   |   | 6. INCINERATION          |
|   |                     |   |                        |   | 7. WASTE OIL REPROCESSING |   | 7. UNDERGROUND INJECTION |
|   |                     |   |                        |   | 8. SOLVENT RECOVERY       |   | 8. OTHER (specify):      |
|   |                     |   |                        |   | 9. OTHER (specify):       |   |                          |

## E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

- ① Many inactive on site chrome solids disposal areas on site. *soaked sludge ponds*  
 ② Hexavalent chrome treatment facilities. (for process wastes + contaminated ground water)  
 ③ Chrome waste storage & treatment tanks.

## V. WASTE RELATED INFORMATION

## A. WASTE TYPE

- ☐ 1. UNKNOWN    ☐ 2. LIQUID    ☒ 3. SOLID    ☐ 4. SLUDGE    ☐ 5. GAS

## B. WASTE CHARACTERISTICS

- ☐ 1. UNKNOWN    ☐ 2. CORROSIVE    ☐ 3. IGNITABLE    ☐ 4. RADIOACTIVE    ☐ 5. HIGHLY VOLATILE  
☒ 6. TOXIC    ☐ 7. REACTIVE    ☐ 8. INERT    ☐ 9. FLAMMABLE

☐ 10. OTHER (specify):

## C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

Inventories and state manifests.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

| a. SLUDGE                         | b. OIL               | c. SOLVENTS                  | d. CHEMICALS                | e. SOLIDS                     | f. OTHER                     |
|-----------------------------------|----------------------|------------------------------|-----------------------------|-------------------------------|------------------------------|
| AMOUNT<br><i>See Attachment A</i> | AMOUNT<br><i>A</i>   | AMOUNT                       | AMOUNT<br><i>0</i>          | AMOUNT                        | AMOUNT                       |
| UNIT OF MEASURE                   | UNIT OF MEASURE      | UNIT OF MEASURE              | UNIT OF MEASURE<br><i>0</i> | UNIT OF MEASURE               | UNIT OF MEASURE              |
| X (1) PAINT, PIGMENTS             | X (1) OILY WASTES    | X (1) HALOGENATED SOLVENTS   | X (1) ACIDS                 | X (1) FLYASH                  | X (1) LABORATORY PHARMACEUT. |
| X (2) METALS SLUDGES              | (2) OTHER (specify): | (2) NON-HALOGENATED SOLVENTS | (2) PICKLING LIQUORS        | (2) ASBESTOS                  | (2) HOSPITAL                 |
| (3) POTW                          |                      | (3) OTHER (specify):         | (3) CAUSTICS                | (3) MILLING/ MINE TAILINGS    | (3) RADIOACTIVE              |
| (4) ALUMINUM SLUDGE               |                      |                              | (4) PESTICIDES              | (4) FERROUS SMLTG. WASTES     | (4) MUNICIPAL                |
| (5) OTHER (specify):              |                      |                              | (5) DYES/INKS               | (5) NON-FERROUS SMLTG. WASTES | (5) OTHER (specify):         |
|                                   |                      |                              | (6) CYANIDE                 | (6) OTHER (specify):          |                              |
|                                   |                      |                              | (7) PHENOLS                 |                               |                              |
|                                   |                      |                              | (8) HALOGENS                |                               |                              |
|                                   |                      |                              | (9) PCB                     |                               |                              |
|                                   |                      |                              | (10) METALS                 |                               |                              |
|                                   |                      |                              | (11) OTHER (specify):       |                               |                              |

*X Not considered hazardous after EPA AS 112 treatment.*  
*Prior to installation of the Cr treatment system 1.4 million cubic yards of lime sludge contaminated with Cr was deposited in the inactive sludge ponds.*

## V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

*Hexavalent chromium*

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

*The State of Texas (T.D.W.R.) detected the contamination of a shallow Aquifer underlying the plant site. Recovery wells have been drilled in order to recover the Cr contaminated ground water.*

## VI. HAZARD DESCRIPTION

| A. TYPE OF HAZARD                                      | B. POTENTIAL HAZARD (mark 'X') | C. ALLEGED INCIDENT (mark 'X') | D. DATE OF INCIDENT (mo., day, yr.) | E. REMARKS  |
|--|--------------------------------|--------------------------------|-------------------------------------|---|
| 1. NO HAZARD   |                                |                                |                                     |   |
| 2. HUMAN HEALTH  |                                |                                |                                     |   |
| 3. NON-WORKER INJURY/EXPOSURE                          |                                |                                |                                     |   |
| 4. WORKER INJURY                                       |                                |                                |                                     |   |
| 5. CONTAMINATION OF WATER SUPPLY                       |                                |                                |                                     |   |
| 6. CONTAMINATION OF FOOD CHAIN                         |                                |                                |                                     |   |
| 7. CONTAMINATION OF GROUND WATER                       | X                              | X                              |                                     | <i>(recovery) First intercept well drilled 1971.</i>  |
| 8. CONTAMINATION OF SURFACE WATER                      |                                |                                |                                     | <i>(contamination from the old PPG waste disposal area &amp; also around production areas.)</i> |
| 9. DAMAGE TO FLORA/FAUNA                               |                                |                                |                                     |   |
| 10. FISH KILL  |                                |                                |                                     |   |
| 11. CONTAMINATION OF AIR                               |                                |                                |                                     |   |
| 12. NOTICEABLE ODORS                                   |                                |                                |                                     |   |
| 13. CONTAMINATION OF SOIL                              | X                              |                                |                                     |   |
| 14. PROPERTY DAMAGE                                    |                                |                                |                                     |   |
| 15. FIRE OR EXPLOSION                                  |                                |                                |                                     |   |
| 16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS |                                |                                |                                     |   |
| 17. SEWER, STORM DRAIN PROBLEMS                        |                                |                                |                                     |   |
| 18. EROSION PROBLEMS                                   |                                |                                |                                     |   |
| 19. INADEQUATE SECURITY                                |                                |                                |                                     |   |
| 20. INCOMPATIBLE WASTES                                |                                |                                |                                     |   |
| 21. MIDNIGHT DUMPING                                   |                                |                                |                                     |   |
| 22. OTHER (specify):                                   |                                |                                |                                     |   |

## VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☒ 1. NPDES PERMIT    ☒ 2. SPCC PLAN    ☒ 3. STATE PERMIT (specify): T.D.W.R., T.H. C.B.  
☒ 4. AIR PERMITS    ☐ 5. LOCAL PERMIT    ☐ 6. RCRA TRANSPORTER  
☐ 7. RCRA STORER    ☐ 8. RCRA TREATER    ☐ 9. RCRA DISPOSER  
☐ 10. OTHER (specify): \_\_\_\_\_

B. IN COMPLIANCE?

- ☒ 1. YES    ☐ 2. NO    ☐ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name &amp; number): \_\_\_\_\_

## VIII. PAST REGULATORY ACTIONS

- ☐ A. NONE    ☒ B. YES (summarize below)

The state of Texas discovered contamination of a shallow groundwater aquifer underlying the site. The company was required to drill recovery wells which would gather the contaminated water for treatment.

## IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE    ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION   |
|---------------------|--|------------------------------|------------------|
| NPDES               | 8-10-'78                                 | EPA                          | Water Inspection |
|                     |  |                              |                  |
|                     |  |                              |                  |

## X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE    ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY                                  | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION         |
|--|--|------------------------------|------------------------|
| Water Inspection revealed groundwater contamination. | 1971*                                    | TDWR                         | Recovery wells drilled |
|  |  |                              |                        |
|  |  |                              |                        |

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

\* 1971 - Date first recovery well drilled.  
Site owned by PDG at that time.

## COMPLIANCE AGREEMENT

THIS COMPLIANCE AGREEMENT IS ISSUED TO AMERICAN CHROME & CHEMICALS INC. (ACC), CORPUS CHRISTI, TEXAS, AND REPRESENTS A DETERMINATION BY THE TEXAS DEPARTMENT OF WATER RESOURCES (TDWR) THAT FORMAL ENFORCEMENT ACTION UNDER SECTION 26.123, TEXAS WATER CODE, AS AMENDED WILL BE WITHHELD AS LONG AS AMERICAN CHROME & CHEMICALS INC. COMPLIES WITH THE COMPLIANCE SCHEDULE CONTAINED HEREIN.

- I. Within 90 days of the effective date of this Agreement, ACC shall institute the ground water recovery plan proposed in the Dames & Moore Report entitled "A Mitigative and Monitoring Program-Hydrogeologic Studies and Investigation of Chromium ( $\text{Cr}^{+6}$ ) in Ground Waters (Phases IV and V)" dated March 1982 (D & M Report).
- II. Prior to November 30, 1983 ACC shall prepare and submit the following items to the Executive Director of the TDWR (Executive Director):
  - A. A detailed evaluation of the effectiveness of the recovery plan for the first 12 months of operation and recommendations for continued recovery.
  - B. A plan for future ground water monitoring containing a schedule and procedure for sampling, and indicating which wells will be sampled. The ground water monitoring plan shall be subject to the review and approval of the Executive Director.
- III. Within 6 months of the effective date of this Agreement ACC shall submit a closure plan for the Executive Director's approval. The closure plan should at a minimum contain the following items:
  - A. Data showing the permeability of cover material(s) to be used and the minimum thickness of each cover material including soil.

ATTACHMENT

- B. A schedule for the sequential closure of the site.
  - C. Final contours of the site after closure, along with proposed maximum and minimum slopes.
- IV. Prior to May 31, 1983 ACC shall submit an interim progress report containing the following:
- A. Quarterly ground water monitoring data reporting the hexavalent chrome concentration for samples taken from the wells identified for sampling in the D & M Report and,
  - B. Monthly data on the following: the volume of water withdrawn from each of the five pumping well groups\*, the water levels in each of the monitoring wells identified in the D & M Report, and the concentration of chromium in samples taken from wells OW-16, OW-U24 and MW-U6.
- \*(The pumping wells shall be divided into the following five pumping well groups for the purposes of monitoring the volume of water withdrawn: (1) three existing wells in the plant area, (2) three new wells in the plant area, (3) five new shallow wells in the residue disposal area and (4) - (5) each of the two deep wells in the residue disposal area.)
- V. ACC shall comply with all relevant statutory, regulatory, permit and legal requirements.
- VI. The president or other authorized official of ACC shall sign this Compliance Agreement, if accepted, and in any case this Agreement shall be returned within 20 days of the date of approval by the Executive Director.
- VII. In the event ACC foresees that it will not conclude one or more of the obligations set forth within the applicable deadline, the Executive Director may, upon application by ACC, extend such deadline for a


ATTACHMENT

reasonable time provided ACC demonstrates it has used due diligence to accomplish the obligations of the Agreement.

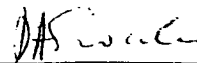
VIII. If accepted by ACC the effective date of this Compliance Agreement will be July 1, 1982.

THIS COMPLIANCE AGREEMENT DOES NOT CONSTITUTE A WAIVER OR MODIFICATION OF ANY APPLICABLE REQUIREMENT AND IN THE EVENT LEGAL ACTION IS INITIATED, THE TEXAS DEPARTMENT OF WATER RESOURCES MAY SEEK CIVIL PENALTIES OR OTHER RELIEF FOR ALL VIOLATIONS, INCLUDING THOSE WHICH OCCURRED PRIOR TO THE ISSUANCE OF THIS AGREEMENT. SIGNING OF THIS AGREEMENT DOES NOT CONSTITUTE ANY ADMISSION OR ACCEPTANCE OF LIABILITY BY AMERICAN CHROME & CHEMICALS INC. NOR DOES AMERICAN CHROME & CHEMICALS INC. ADMIT THAT IT HAS VIOLATED ANY STATUTES OF THE STATE OR RULES OF THE TEXAS DEPARTMENT OF WATER RESOURCES.

Approved this 14th day of July, 1982.

  
Harvey Davis, Executive Director  
Texas Department of Water Resources

Approved this \_\_\_\_ day of \_\_\_\_\_, 1982.

  
D. A. Swales, President  
American Chrome & Chemicals Inc.

Last  
ATTACHMENT  
7-14-82